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## BIB DATA SHEET

CONFIRMATION NO. 6931

SERIAL NUMBER	FILING or 371(c) DATE	CLASS	GROUP ART UNIT	ATTORNEY DOCKET NO.		
10/644,775	08/21/2003	424	1647	HEALOR-202		
<b>APPLICANTS</b> Tamar Tennenbaum, Jerusalem, ISRAEL; <del>Sanford Sampson, Rehovot, ISRAEL;</del> <del>Toshio Kuroki, Kawasaki, JAPAN;</del> <del>Ady Alt, Raanana, ISRAEL;</del> <del>Shimon Shen, Shaarai Tikva, ISRAEL;</del> <i>see Rule 1.48 petition filed 3/14/07</i>						
<b>** CONTINUING DATA *****</b> This application is a CIP of 10/169,801 07/09/2002 which is a 371 of PCT/IL01/00675 07/23/2001 This application 10/644,775 08/21/2003 claims benefit of 60/486,906 07/15/2003						
<b>** FOREIGN APPLICATIONS *****</b>						
<b>** IF REQUIRED, FOREIGN FILING LICENSE GRANTED ** ** SMALL ENTITY **</b> 11/17/2003						
Foreign Priority claimed	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		<b>STATE OR COUNTRY</b>	<b>SHEETS DRAWINGS</b>	<b>TOTAL CLAIMS</b>	<b>INDEPENDENT CLAIMS</b>
35 USC 119(a-d) conditions met	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	<input type="checkbox"/> Met after Allowance	ISRAEL	20	111	16
Verified and	/MARIANNE P ALLEN/ Examiner's Signature		Initials			
<b>ADDRESS</b> FULBRIGHT & JAWORSKI, LLP 666 FIFTH AVE NEW YORK, NY 10103-3198 UNITED STATES						
<b>TITLE</b> Methods and pharmaceutical compositions for healing wounds						
<b>FILING FEE RECEIVED</b> 1840	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:			<input type="checkbox"/> All Fees		
				<input type="checkbox"/> 1.16 Fees (Filing)		
				<input type="checkbox"/> 1.17 Fees (Processing Ext. of time)		
				<input type="checkbox"/> 1.18 Fees (Issue)		
				<input type="checkbox"/> Other _____		
			<input type="checkbox"/> Credit			



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CONFIRMATION NO. 6931

<b>SERIAL NUMBER</b> 10/644,775	<b>FILING OR 371(c) DATE</b> 08/21/2003 <b>RULE</b>	<b>CLASS</b> 514	<b>GROUP ART UNIT</b> 1647	<b>ATTORNEY DOCKET NO.</b> HEALOR-202
<b>APPLICANTS</b> Tamar Tennenbaum, Jerusalem, ISRAEL;				
<b>** CONTINUING DATA *****</b> This application is a CIP of 10/169,801 07/09/2002 which is a 371 of PCT/IL01/00675 07/23/2001 This application 10/644,775 claims benefit of 60/486,906 07/15/2003				
<b>** FOREIGN APPLICATIONS *****</b>				
<b>IF REQUIRED, FOREIGN FILING LICENSE GRANTED** SMALL ENTITY **</b> ** 11/17/2003				
Foreign Priority claimed <input type="checkbox"/> yes <input type="checkbox"/> no 35 USC 119 (a-d) conditions <input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after met Allowance Verified and Acknowledged <u>                    </u> Examiner's Signature Initials		<b>STATE OR COUNTRY</b> ISRAEL	<b>SHEETS DRAWING</b> 20	<b>TOTAL CLAIMS</b> 111
				<b>INDEPENDENT CLAIMS</b> 16
<b>ADDRESS</b> 24972				
<b>TITLE</b> METHODS AND PHARMACEUTICAL COMPOSITIONS FOR HEALING WOUNDS				
<b>FILING FEE RECEIVED</b> 1840	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:		<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees ( Filing ) <input type="checkbox"/> 1.17 Fees ( Processing Ext. of time ) <input type="checkbox"/> 1.18 Fees ( Issue ) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit	